

CLAIMS ONLY

Application Number

10734973

Filing Date

Applicant(s) -

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
2						
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49						
50						
Total Indep			1			
Total Depend			15			
Total Claims			16			

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	Indep	Depend	Indep	Depend	Indep
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100					
Total Indep					
Total Depend					
Total Claims					